

**POLITICAL INQUIRY RECORD:  
FEDERAL, STATE & LOCAL CANDIDATE ADS  
ALL QUESTIONS MUST BE ANSWERED**

- ☐ Federal Candidate
- ☒ State or Local Candidate
- 

**1. Requested by (Agency name, address, phone number & contact):**

**Agency Name** Group M. Mec

**Contact** Melissa Mercado

**Phone Number** 787-522-8817

**Address** B7 Tabonuco Street, Suite 1506, Guaynabo, PR 00968-3028

**2. On behalf of (Candidate name & authorized campaign committee name):**

Partido Independentista Puertorriqueño

**3. Election (Office sought & date):**

Nov 8

**4. Date of request:**

Oct 31 2016

**5. Request received by:**

Sarah Martinez

**6. Details:**

Regular Political Buy

**7. Name, Address & Phone Number of contact person for the candidate or candidate's authorized campaign committee:**

**Contact Name** Calixto Negrón

**Phone Number** 787-782-1455

**Address** 963 Ave. Roosevelt San Juan PR, 00920-2901



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**8. Name of treasurer of authorized committee:**

Carmen Faura

**9. Date and nature of follow-ups, if any:**

**10. Disposition:**

- ☒ Accepted – see contract details
- ☐ Rejected – provide reason:

Additional Information:

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ FEDERAL CANDIDATE

☒ STATE/LOCAL CANDIDATE

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

<b>Station and Location:</b> <u>Telemundo</u>	<b>Date:</b> <u>10/31/2016</u>
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I, Lourdes Ocasio  
 being/on behalf of: Partido Independentista  
 a legally qualified candidate of the Legislación  
 political party for the office of: San Juan  
 in the Elecciones 2016  
 election to be held on: noviembre 8, 2016

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
15ss	6a-12a	Mo-Su	tv	5	1

Attach proposed schedule with charges (if available):



I represent that the payment for the above described broadcast time has been furnished by

Partido Independentista

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Carmen Faura

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.**

***To Be Signed By Candidate or Authorized Committee***

10/31/16  
Date

[Signature]  
Signature

***To Be Signed By Station Representative***

☒ Accepted  
[Signature]  
Signature

☐ Accepted in Part  
Saeed  
Printed Name

☐ Rejected  
S.E.  
Title

**CONTRACT**

**WKAQ**  
**383 Franklin D Roosevelt Avenue**  
**Hato Rey, PR 00918**  
**(787) 641-2222**

And:

**\*GROUPM/MEDIAEDGE**  
**B7 CALLE TABONUCO**  
**SUITE 1506**  
**GUAYNABO, PR 00968-3028**  
**USA**

<u>Contract / Revision</u> 697106 /		<u>Alt Order #</u>
<u>Product</u> Juan Dalmau Nov 2-7 46875		
<u>Contract Dates</u> 11/02/16 - 11/07/16	<u>Estimate #</u>	
<u>Advertiser</u> PARTIDO INDEPENDENTISTA PUERTORRIQI	<u>Original Date / Revision</u> 11/01/16 / 11/01/16	
<u>Billing Cycle</u> EOM/EOC	<u>Billing Calendar</u> Calendar	<u>Cash/Trade</u> Cash
<u>Station</u> WKAQ	<u>Account Executive</u> Sarah Martinez	<u>Sales Office</u> Puerto Rico Loc
<u>Special Handling</u>		
<u>Demographic</u> RA1849		
<u>IDB#</u>	<u>Advertiser Code</u>	<u>Product Code</u>
<u>Agency Ref</u> 34474	<u>Advertiser Ref</u> 40097	

*Line	Ch	Start Date	End Date	Description	Start/End Time	Days	Length	Spots/Week	Rate	Type	Spots	Amount
N 1	WKAQ	11/07/16	11/07/16	5P-6P M-F	5P-6P	M-----	:15	1	\$850.00	NM	1	\$850.00
N 2	WKAQ	11/03/16	11/03/16	5P-6P M-F	5P-6P	---T---	:15	1	\$850.00	NM	1	\$850.00
N 3	WKAQ	11/07/16	11/07/16	6P-7P M-F	6P-7P	M-----	:15	1	\$750.00	NM	1	\$750.00
N 4	WKAQ	11/03/16	11/03/16	12:00P-1:00P	12:00P-1:00P	---T---	:15	1	\$100.00	NM	1	\$100.00
N 5	WKAQ	11/07/16	11/07/16	10P-11P M-F	10P-11P	M-----	:15	1	\$850.00	NM	1	\$850.00
<b>Totals</b>											<b>5</b>	<b>\$3,400.00</b>

Time Period	# of Spots	Gross Amount	Agency Comm.	Net Amount
11/01/16 - 11/07/16	5	\$3,400.00	(\$510.00)	\$2,890.00
<b>Totals</b>	<b>5</b>	<b>\$3,400.00</b>	<b>(\$510.00)</b>	<b>\$2,890.00</b>

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(\* Line Transactions: N = New, E = Edited, D = Deleted)  
 FOR NBC & TELEMUNDO STATION AND COZITV NETWORK CONTRACTS:

This Confirmation Contract Part I, together with the NBC/Telemundo TV Stations Confirmation Contract Part II or the CoziTV Network Advertising Agreement-Part II (the "Part IIs"), as applicable, which have previously been provided under separate cover and/or are available upon request, shall constitute an agreement among the Advertising Agency named above, the Advertiser named above and NBC/Telemundo and/or the CoziTV Network for the advertising as herein provided. Advertiser and Agency shall be jointly and severally liable for all liabilities and obligations of either party hereunder. Except as expressly set forth in the applicable Part II, all warranties, whether express or implied, are hereby disclaimed. Unless otherwise agreed in writing and except as otherwise provided in the applicable Part II, either Agency or NBC/Telemundo and/or the CoziTV Network may terminate this order only by written notice to the other at least 28 days prior to the effective date of such termination. NBC/Telemundo and/or the CoziTV Network is proceeding in reliance on your acceptance of and agreement to the terms set forth herein, including all terms and conditions contained in the applicable Part II, with respect to your advertising commitment as set forth above.

FOR NBCE CONTRACTS:

This NBC Everywhere Confirmation Contract: Part I ("Part I"), together with the NBC Everywhere Terms and Conditions Part II ("Part II"), which has previously been provided under separate cover and/or is available upon request, shall constitute an agreement among the Advertising Agency named above, the Advertiser named above and NBC Everywhere, a division of NBC Universal, Inc. ("NBCU") as agent for the billing and payment related to the out of home platform advertising as herein provided. Advertiser and Agency shall be jointly and severally liable for all liabilities and obligations of either party hereunder. Except as expressly set forth in Part II, all warranties, whether express or implied, are hereby disclaimed. Unless otherwise agreed in writing and except as otherwise provided in Part II, either Agency or NBCU may terminate this order only by written notice to the other at least 60 days prior to the effective date of such termination; except all advertisements on the Premier Retail Network are firm and non-cancellable by Agency. NBCU is proceeding in reliance on your acceptance of and agreement to the terms set forth herein, including all terms and conditions contained in Part II, with respect to your advertising commitment as set forth above. The delivery of material or traffic instructions by the Agency or Advertiser relating to any advertising specified on this Part I shall confirm your consent to the terms and provisions of this Part I and Part II.





A GroupM Company  
PO BOX 13429  
SANTURCE, PR 00908

# BROADCAST CONTRACT

TELENUNDO OF P.R.  
PO BOX 70342  
SAN JUAN, PR 00936-8342

CLIENT: PARTIDO INDEPENDENTISTA  
PRODUCT: JUAN DALMAU  
CAMPAIGN: COMPRA NOV2-8 2016  
DATE: 01 NOV 2016 04:53PM  
NUMBER: 0046897  
CLIENT/PROD/NO.: 0202 /03 /50473  
PAGE: 1

ATTN : MARIA RAMOS

The Supplier will submit its invoice to the Agency within the first (30) calendar days from the last day of the month in which the services were rendered. The Agency will not honor invoices submitted after the lapse of the aforesaid (30) day period, and Supplier accepts and agrees to this requirement, and understands that if the Supplier does not comply with this requirement it waives its right to payment for services rendered for the pertinent month.

LEN	DAY / PROGRAM / TIME	COST	WEEK OF	TOTAL SPOTS
OC NO 31 07				
15 MO	500P-600P #4 TELENOTICIAS 5PM	850.00	1	1
NO 03				
15 TH	500P-600P #5 TELENOTICIAS 5PM	850.00	1	1
OC NO 31 07				
15 MO	600P-700P #6 DANDO CANDELA	750.00	1	1
NO 03				
15 TH	1200P-100P #7 NOVELA	100.00	1	1
OC NO 31 07				
15 MO	1000P-1100P #8 TELENOTICIAS 10PM	850.00	1	1
Revisado para corregir costos				5
				TOTAL SPOTS
				3400.00
				TOTAL COST

MEDIA DEPARTMENT

MEDIA

DATE